North Brookfield
Hearts for Heat

CONFIDENTIAL APPLICATION FOR ASSISTANCE - 2016

http://www.heartsforheat.org/NorthBrookfield/index.html

Applications will be reviewed after December 15, 2015. To be considered for assistance, please mail completed form along with all requested documentation and receipts to the North Brookfield Hearts for Heat, P.O. 44, North Brookfield, MA 01535.

Note: To be considered an emergency distribution, all awarded assistance must be delivered by March 15, 2016. Extensions may be made at the discretion of the board due to snowy/cold weather.

MUST BE NORTH BROOKFIELD RESIDENT For more immediate questions, email ellen@heartsforheat.org.

Date of Application _____ **WCAC APPLICATION #** _____

A. IDENTIFICATION

Name of Applicant: _____ Cell Phone: _____

Legal residence: _____

Mailing Address (if Different) _____

Home Phone: _____Email: _____

Own: _____ Rent: _____ **Type of Fuel (Circle One)** **Oil** **Electric** **Natural Gas**

Home Phone: _____ **Pellets** **Propane** **Cord Wood**

Cell /Work Number: _____ Total Number in Household: _____

Ages of Everyone in Household: _____ _____ _____ _____ _____ _____ _____

B. REASON FOR REQUESTING ASSISTANCE: REQUIRED

_____

_____

_____

IMPORTANT NOTE: It is REQUIRED that you apply for aid through (WCAC) Worcester Community Action Council prior to seeking support from Hearts for Heat. WCAC assists home owners and renters with heating bills, past due balances, providing forgiveness credit, and setting up monthly payments. WCAC can be reached by calling (508) 754-1176 and following prompts.

Failure to do so may affect the outcome of your Hearts for Heat application.

Have you applied to WCAC? ☐ Yes ☐ No Approved Amount: $ _____

Outcome summary:_____ID# _____ Remaining Balance: $ _____

Have you applied to other fuel assistance programs? ☐ Yes ☐ No Approved Amount: $ _____

Outcome summary:_____ID# _____ Remaining Balance: $ _____

✓**Check box** ☐ Copy of your current heating bill attached?

✓**Check box** ☐ copy of your WCAC award or rejection letter attached?

Relevant documentation is required for processing application.

C. INCOME **Household**

Gross income from all sources in the past 6 weeks: _____

Total adjusted gross income from the prior year's IRS 1040: _____

D. MAJOR MONTHLY EXPENSES

Rent/Mortgage (Principal, Interest, Taxes, and Insurance): _____

Car or Equipment Loan: _____

Credit Card Payment: _____

Other: _____ _____

Other: _____ _____

E. OTHER EXPENSES IMPORTANT TO SUPPORTING YOUR REQUEST:

_____

_____

_____

F. ASSETS:

1. Name and Address of Banks: **Value of Account(s)**

_____ _____

_____ _____

2. Stocks, Bonds, Securities, etc. **Value of Account(s)**

_____ _____

_____ _____

3. Other personal property (includes vehicles, motorcycles, trailers, etc.): **Value of Account(s)**

_____ _____

_____ _____

G. ADDITIONAL INFORMATION: _____

_____

_____

SIGNATURE OF APPLICANT:_____ **DATE:** _____

For Official Use Only: